



# State of Maine

## BARBERING & COSMETOLOGY LICENSING PROGRAM

The information in this application packet is to assist you in completing your application. It is recommended that you review applicable laws and rules for further guidance.

### **INSTRUCTOR LICENSE**

AESTHETICIAN, BARBER, LIMITED BARBER,  
COSMETOLOGIST, OR NAIL TECHNICIAN

Do not return the following 4 informational pages with your  
application; it is for your information only

Department of Professional and Financial Regulation  
Office of Professional and Occupational Regulation  
(Mailing address) 35 State House Station, Augusta, ME 04333  
(Office location) Gardiner Annex, 76 Northern Avenue, Gardiner, Maine 04345

Office Direct Line (207) 624-8579  
TTY users call Maine relay 711  
FAX (207) 624-8637

Web address: [www.maine.gov/professionallicensing](http://www.maine.gov/professionallicensing)  
Email: [barbercosm.lic@maine.gov](mailto:barbercosm.lic@maine.gov)

## **APPLICATION INSTRUCTIONS FOR INSTRUCTOR LICENSE**

Complete and submit this application and supporting documents to the Maine Barbering and Cosmetology Licensing Program. **The following must be submitted with the application depending on your pathway:**

### **PATHWAY 1: Student Instructor Training (See Rule Ch. 24 (2)(3)(A)):**

1. Fee;
2. Proof that you have completed at least the 12th grade in a secondary school of learning or its equivalent; and
3. Transcript or affidavit demonstrating that you have satisfactorily completed an instructor course of study (600 hours) at a licensed school.

### **PATHWAY 2: Practice Experience (See Rule Ch. 24 (2)(3)(B)):**

1. Fee;
2. Proof that you have completed at least the 12th grade in a secondary school of learning or its equivalent;
3. Proof of a minimum of 1,500 hours of license practice work experience obtained during the five(5) years immediately preceding the submission of application; and
4. Transcripts from a post-secondary school showing evidence of four (4) credits directly related to education or teaching.

### **PATHWAY 3: Post-Secondary Education Related to Teaching (See Rule Ch. 24 (2)(3)(C)):**

1. Fee;
2. Proof that you have completed at least the 12th grade in a secondary school of learning or its equivalent; and
3. Transcripts from a post-secondary school showing evidence of nine (9) credits directly related to education or teaching.

### **PATHWAY 4: Endorsement (See Rule Ch. 24 (2)(3)(D)):**

1. Fee;
2. Proof that you have completed at least the 12th grade in a secondary school of learning or its equivalent; and
3. An original verification of licensure from the state licensing board or jurisdiction that you currently hold a valid Instructor license.

### **NOTE:**

**If you are submitting foreign education, you must obtain a foreign education credential evaluation from an approved United States credentialing agency. For a current list of approved credentialing agencies, please visit our website [www.maine.gov/professionallicensing](http://www.maine.gov/professionallicensing).**

## **NOTE:**

The Barbering & Cosmetology Licensing Program requires that all supporting documents and fees be submitted with the filing of your application. All fees are non refundable. **Your application will be considered incomplete if your supporting documents and/or fees are omitted. An application that remains incomplete for more than sixty (60) days will become null and void.** Documents that have been modified or altered (including the use of any white out substance) in any way will not be accepted.

## **PROCESSING TIME:**

- ✓ Your application has a greater chance of being processed expeditiously if it is complete and all supporting documents are attached. Please visit our website at [www.maine.gov/professionallicensing](http://www.maine.gov/professionallicensing) to monitor your application's progress in real time. If the status appears as "PENDING", this means that your application was received by this office, and is pending or under review. Once reviewed, and if everything about your application is complete and complies with requirements, the license will be issued. The status online will show as "ACTIVE". If your application is incomplete a letter will be mailed to you.
- ✓ **Please refrain from calling our office to "check" on your application as these calls only serve to slow our ability to review and process applications.**

## **NOTICES:**

### **IMPORTANT INFORMATION REGARDING YOUR LICENSE:**

**The Office no longer prints licenses.** You will be notified by email from [noreply@maine.gov](mailto:noreply@maine.gov) using the email address you provide on this application. A copy of your license will be attached to that email. (a paper license will not be sent by regular mail). **The email with your license will contain the access code that is required to renew your license online when the time comes.** You may also update your contact information and email address on our website [www.maine.gov/professionallicensing](http://www.maine.gov/professionallicensing) using your access code.

Approximately sixty (60) days prior to the expiration of your license a courtesy renewal reminder will be sent to you by email. It is important that you maintain a current email on file, or you risk not being able to receive the renewal reminder. You do not need to wait for a renewal reminder to renew your license. The online renewal opens sixty (60) days prior to the license expiring and you may renew online anytime. Failure to receive a courtesy renewal reminder notice does not waive your responsibility to renew your license in a timely manner.

## **NOTICES:**

### **10 Day Notification Requirement**

Pursuant to 10 MRS §8003-G - any change in name, address, email address, criminal convictions, disciplinary actions, or any material change set forth in your original application for licensure must be reported to the Office within 10 days.

You can access this Law for your review at:

<http://www.mainelegislature.org/legis/statutes/10/title10ch901sec0.html>

## **LAWS AND RULES:**

**Disclosure:** Effective July 1, 2012, the Barbering and Cosmetology Licensing Program has discontinued the Maine Laws and Rules portion of the examination and in its place requires the applicant to attest that s/he will obtain, read and abide by all Maine laws and rules related to the practice of Barbering and Cosmetology as a part of the application process. Applicants for an initial practice license are required to take and pass the applicable written and practical examinations in order to qualify for licensure. The holder of an active license has an obligation and responsibility to keep abreast of laws and rules and maintaining current and up to date practice standards.

### ***Maine Barbering and Cosmetology Laws and Rules***

<http://www.maine.gov/pfr/professionallicensing/professions/barbers/laws.html>

Access to all relevant laws and rules are accessible from this web page.

### ***Title 5 Administrative Procedures and Services Chapter 341***

<http://www.mainelegislature.org/legis/statutes/5/title5ch341sec0.html>

### ***Title 10 Department of Business Regulation Law §§8001-8011***

<http://legislature.maine.gov/statutes/10/title10ch901sec0.html>

### ***Office of Professional and Occupational Regulation Rules 02 041***

<http://www.maine.gov/sos/cec/rules/02/chaps02.htm#041>

Chapter 10, Establishment of License Fees

Chapter 11, Late Renewals

This office cannot provide you with a hardcopy of laws and rules. However, all of these documents are available online at [www.maine.gov/professionallicensing](http://www.maine.gov/professionallicensing). Please visit the websites listed above to access these documents electronically. These documents may be subject to change without notice and it is strongly advised that you periodically revisit these sites for any updates.

STATE OF MAINE DEPARTMENT OF PROFESSIONAL & FINANCIAL REGULATION  
OFFICE OF PROFESSIONAL AND OCCUPATIONAL REGULATION

**Mailing Address:** 35 State House Station, Augusta, Maine 04333 **Courier/Delivery address:** 76 Northern Avenue, Gardiner, Maine 04345  
Phone: (207) 624-8579 Fax: (207) 624-8637 TTY users call Maine relay 711 web: [www.maine.gov/professionallicensing](http://www.maine.gov/professionallicensing)

### Frequently Asked Questions:

- **Where do I send my application?** Our mailing address is 35 State House Station, Augusta, Maine 04333-0035
- **Where are you located?** Gardiner Annex Building, 76 Northern Avenue, Gardiner, Maine.
- **What hours are you open?** 8:00 AM to 5:00 PM weekdays
- **Can I come to Gardiner to drop off my application?** Yes, but you will not leave with a license.
- **Can I come to Gardiner to pick up my license?** No. Your license will be e-mailed to you.
- **How long does it take to process an application?** You can check your status on our website at [www.maine.gov/professionallicensing](http://www.maine.gov/professionallicensing). Your license will show up as "PENDING" at first; as soon as your status is "ACTIVE" you are authorized to practice.
- **How far back do I go answering the criminal question?** Any conviction, ever.

### NOTICES:

**BACKGROUND CHECK:** Pursuant to 5 MRS §5301 - 5303, the State of Maine is granted the authority to take into consideration an applicant's criminal history record. The Office of Professional and Occupational Regulation requires a criminal history records check as part of the application process for all applicants.

**PUBLIC RECORD:** This application is a public record for purposes of the Maine Freedom of Access Law (1 MRS §401 et seq). Public records must be made available to any person upon request. This application for licensure is a public record and information supplied as part of the application (other than social security number and credit card information) is public information. Other licensing records to which this information may later be transferred will also be considered public records. Names, license numbers and mailing addresses listed on or submitted as part of this application will be available to the public and may be posted on our website.

**SOCIAL SECURITY NUMBER:** The following statement is made pursuant to the Privacy Act of 1974. Disclosure of your Social Security Number is mandatory. Solicitation of your Social Security Number is solely for tax administration purposes, pursuant to 36 MRS §175 as authorized by the Tax Reform Act of 1975 (42 USC §405(C)(2)(C)(i)). Your Social Security Number will be disclosed to the State Tax Assessor or an authorized agent for use in determining filing obligations and tax liability pursuant to Title 36 of the Maine Revised Statutes. No further use will be made of your Social Security Number and it shall be treated as confidential tax information pursuant to 36 MRS §191

#### Before you seal the envelope, did you:

- Complete every item on the application (incomplete applications may be returned)
- Answer the criminal background disclosure questions
- Sign and date your application
- Include correct amount (payable to Maine State Treasurer) or credit card information (plus signature)
- Include any required transcripts or exam results
- Make a copy of your application to keep for your records
- DO NOT SEND CASH.



**STATE OF MAINE  
DEPARTMENT OF PROFESSIONAL  
AND FINANCIAL REGULATION  
OFFICE OF PROFESSIONAL AND OCCUPATIONAL REGULATION  
INDIVIDUAL LICENSE APPLICATION**

APPLICANT INFORMATION (please print)

FULL LEGAL NAME      *FIRST*                      *MIDDLE INITIAL*                      *LAST*

ANY OTHER NAMES EVER USED:

DATE OF BIRTH      *mm / dd / yyyy*                      SOCIAL SECURITY NUMBER      -      -

MAILING ADDRESS

CITY                      STATE                      ZIP                      COUNTY

PHONE # (      )                      FAX # (      )                      E-MAIL - (Your license will be emailed)

**CRIMINAL BACKGROUND DISCLOSURE**

*NOTE: Failure to disclose criminal convictions may result in denial, fines, suspension and/or revocation of a license.*

**1. Have you ever been convicted by any court of any crime?**

(circle one)

NO

YES

If yes, enclose a detailed signed description of what happened (including dates) and a copy of the court judgment.

**2. Has any jurisdiction taken disciplinary action against any professional license you hold or have held, or denied your application for licensure? (circle one)**

NO

YES

If yes, enclose a detailed signed explanation and copies of all documents.

By my signature, I hereby certify that the information provided on this application is true and accurate to the best of my knowledge and belief. By submitting this application, I affirm that the Office of Professional and Occupational Regulation will rely upon this information for issuance of my license and that this information is truthful and factual. I also understand that sanctions may be imposed including denial, fines, suspension or revocation of my license if this information is found to be false.

**SIGNATURE**

**DATE**

**Barbering and Cosmetology Program  
Instructor License  
Required Fees: \$41.00(Non-Refundable)**

**LICENSE TYPE: YOU MUST CHECK ONE FROM  
BELOW**

- |  |   |
|--|---|
| <input type="checkbox"/> Instructor Aesthetician (IAE 1421)    | <input type="checkbox"/> Instructor Limited Barber (ILB 1421) |
| <input type="checkbox"/> Instructor Barber (IBA 1421)          | <input type="checkbox"/> Instructor Cosmetologist (ICO 1421)  |
| <input type="checkbox"/> Instructor Nail Technician (IMA 1421) |   |

*Office Use Only:*

Check # \_\_\_\_\_

Amount: \_\_\_\_\_

Cash # \_\_\_\_\_

Lic. # \_\_\_\_\_

1421 - \$20.00

2619 - \$21.00

**PAYMENT OPTIONS:**

Make checks payable to "Maine State Treasurer" - If you wish to pay by credit or debit card, please fill out the following:

NAME OF CARDHOLDER (please print)      *FIRST*                      *MIDDLE INITIAL*                      *LAST*

I authorize the Department of Professional and Financial Regulation, Office of Professional and Occupational Regulation to charge my      ☐ AMERICAN EXPRESS      ☐ VISA      ☐ MASTERCARD      ☐ DISCOVER      the following amount: \$ \_\_\_\_\_

☐ I understand that fees are non-refundable

Card number:      *XXXX-XXXX-XXXX-XXXX*

Expiration Date      *mm / yyyy*

**SIGNATURE**

**DATE**

## **SECTION 1: PATHWAY TYPE**

### **How are you applying? (Check one)**

- ☐ **PATHWAY 1:** Student Instructor Training (See Rule Ch. 24 (2)(3)(A))
- ☐ **PATHWAY 2:** Practice Experience (See Rule Ch. 24 (2)(3)(B))
- ☐ **PATHWAY 3:** Post-Secondary Education Related to Teaching (See Rule Ch. 24 (2)(3)(C))
- ☐ **PATHWAY 4:** Endorsement (See Rule Ch. 24 (2)(3)(D))

## **SECTION 2: APPLICANT'S CERTIFICATION AND SIGNATURE**

**Read the statement below and sign where indicated as your certification of the information provided on this application.**

Applications that are incomplete, altered (including use of any white out), defaced, or compromised will not be accepted. This includes, but is not limited to, unanswered questions, lack of appropriate signature, illegible information, missing required supporting documents, and/or missing or wrong fee.

**I verify that I have read all of the Maine Barbering & Cosmetology Licensing Programs Laws and Rules, including Chapter 24 which describes the licensure requirements for Instructors.**

By my signature, I hereby certify that the information provided on this application is true and accurate to the best of my knowledge and belief. By submitting this application I understand that the Barbering & Cosmetology Licensing Program will rely upon this information for issuance of my license and that this information is truthful and factual. I further understand that sanctions may be imposed, including denial, suspension or revocation of my license, if this information is found to be false.

Printed Name of Applicant	
Signature of Applicant	Date
	

